

**ATTACHMENT 3**  
**(to RFP W6-01687-A3)**

**U.S. ENVIRONMENTAL PROTECTION AGENCY(EPA)**  
**WASHINGTON TELECOMMUNICATIONS AND COMPUTING SERVICES**  
**(WASHINGTON TACS) PROCUREMENT**

**PAST PERFORMANCE QUESTIONNAIRE**

**U.S. ENVIRONMENTAL PROTECTION AGENCY (EPA)**  
**WASHINGTON TELECOMMUNICATIONS AND COMPUTING SUPPORT**  
**(WASHINGTON TACS) PROCUREMENT**  
**PAST PERFORMANCE QUESTIONNAIRE**

**INSTRUCTIONS TO OFFERORS**

1. Complete a separate copy of this questionnaire for each contract/subcontract similar to the proposed contract that you, the offeror has performed since January 1, 1995.
2. Complete a separate copy of this questionnaire for each contract/subcontract similar to the proposed subcontract that each of your proposed subcontractors has performed since January 1, 1995.
3. Please complete Blocks A and B of this questionnaire. **Do NOT enter any information in Blocks C, D, E and F.**
4. This questionnaire consists of 3 pages, excluding this page.

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|   |                |              |  |  |
|---|----------------|--------------|--|--|
| <b>BLOCK A</b>  |                |              |  |  |
| Name of Offeror:  |                |              |  |  |
| Name and Address of Proposed Subcontractor and/or Teaming Partner (if the contract information provided below applies to the offeror's proposed subcontractor/teaming partner): |                |              |  |  |
| <b>BLOCK B</b>  |                |              |  |  |
| Name of Contract Customer :   |                |              |  |  |
| Address of Contract Customer:   |                |              |  |  |
| Contract Number and Title:  |                |              |  |  |
| Contract Value (\$):  |                |              |  |  |
| Type of Contract:   |                |              |  |  |
| Description of Contract:  |                |              |  |  |
| Contract Period of Performance:   | From (Mo./Yr): | To (Mo./Yr): |  |  |
| Name, Designation, and Phone No. of Customer's Contract Manager for this Contract:  |                |              |  |  |

\*\*\*\*\* *Note to offeror - Do NOT enter any information below this line* \*\*\*\*\*

| <b>BLOCK C</b>   |             |                       |              |                |
|--|-------------|-----------------------|--------------|----------------|
| Performance Subfactor  | Outstanding | Exceeded Expectations | Satisfactory | Unsatisfactory |
| Quality of Product or Service                                  |             |                       |              |                |
| Timeliness of Performance                                      |             |                       |              |                |
| Effectiveness of Management (including subcontractors, if any) |             |                       |              |                |
| Compliance with Cost Estimates                                 |             |                       |              |                |
| Customer Satisfaction  |             |                       |              |                |

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|  |  |  |
|--|--|--|
| CONTINUATION SHEET<br>HEADER BLOCK   |  |  |
| Name of Offeror:   |  |  |
| Name of Proposed<br>Subcontractor/Teaming Partner<br>(if the contract information<br>provided applies to the offeror's<br>proposed subcontractor/ teaming<br>partner): |  |  |
| Name of Contract Customer :  |  |  |
| Contract Number and Title:   |  |  |

|  |  |  |
|--|--|--|
| BLOCK D  |  |  |
| Data supporting outstanding<br>performance (use a separate<br>sheet, if needed):                           |  |  |
| Data supporting unsatisfactory<br>performance (use a separate<br>sheet, if needed):                        |  |  |
| Does the contractor have any<br>corporate affiliations with the<br>contract customer? If YES,<br>describe. |  |  |
| Would the contract customer do<br>business with the contractor<br>again?                                   |  |  |

|   |           |       |
|---|-----------|-------|
| BLOCK E   |           |       |
| Name and Title of Customer<br>Official Providing Information: |           |       |
| Official's Complete Mailing<br>Address:                       |           |       |
| Telephone and Fax Numbers:                                    | Tel. No.: | Fax:  |
| Date and Time of Call:  | Date:     | Time: |

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|  |  |
|--|--|
| CONTINUATION SHEET<br>HEADER BLOCK   |  |
| Name of Offeror:   |  |
| Name of Proposed<br>Subcontractor/Teaming Partner<br>(if the contract information<br>provided applies to the offeror's<br>proposed subcontractor/ teaming<br>partner): |  |
| Name of Contract Customer :  |  |
| Contract Number and Title:   |  |
| BLOCK F  |  |
| Name of EPA Employee<br>Obtaining Past Performance<br>Information:   |  |
| Title of EPA Employee:   |  |
| Date Questionnaire Completed:  |  |
| Signature of EPA Employee:   |  |